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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *none re 10/24/05*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none re 10/24/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 12/23/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 10	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 6
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Verified and Acknowledged  
 Examiner's Signature *re* Initials

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TITLE  
 Presenting driving directions

FILING FEE  RECEIVED 1230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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